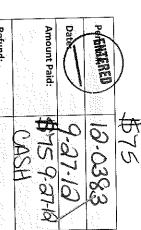
SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

## APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Dat



INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED

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5	(CV)
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TO APPLICANT. HOW DO'I FILEOUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp) Refund:

VALTIES		·	11110	Utner: (explain)		xplain)	Other: (explain)		
	×	_	147 H. 1			Conditional Use: (explain)	Condition		
	×	7	10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	orbite control orbite		Special Use: (explain)	Special U		***
	×	1	1007			100		ļ	
2			0/ 100/	(specify) Di Taucol		Accessory Building Addition/Alteration	Accessory	×	
1 2 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	× 20 -	-	11			Accessory Building (specify)	Accessory	ه 	Municipal Use
	×					Addition/Alteration (specify)	Addition/		
	×	-	100 miles (100 miles) (100 mil			Mobile Home (manufactured date)	Mobile H		
	×	-	☐ cooking & food prep facilities)	, <u>or</u> □ cooking	sleeping quarters,	Bunkhouse w/ ( $\square$ sanitary, or $\square$ sleeping quarters, or	Bunkhous		
		-			žе	with Attached Garage		Use	☐ Commercial Use
- Aller	ŧ	_				with (2 <sup>nd</sup> ) Deck			
	×				111111111111111111111111111111111111111	with a Deck			
	× )					with (2 <sup>nd</sup> ) Porch		7	A Residential Ose
	× :			-		with Loft	-	3	<b>4</b>
	× ;	-			ack, etc.)	Residence (i.e. cabin, hunting shack, etc.	Residence		
7	×				re on property)	Principal Structure (first structure on property)	Principal S		
Footage	Dimensions	0		re	Proposed Structure	Pr		<u> </u>	Proposed Use
	iselgin.		Width: QO		Length: /			tion:	Proposed Construction:
ر ا	10		width:		Length:		ing applied for	(if permit be	Existing Structure. (If permit being applied for is relevant to it)
					\$400 mm				
			Compost lollet			Foundation		Property	
	ntract)	více cor		X None		1	iness on	Run a Business on	
1	17	Vau	Privy (Pit) or			Basement	niction hide	☐ Conversion	8700
以后外	Come	Speci				1-Story + Loit	Alteration		\$ 2 Kg 2
	Specify Type:		(New) Sanitary		Vear Round	1-Story	truction	New Construction	
□ City		200400000000000000000000000000000000000	☐ Municipal/City	<b>-</b>	Seconal				
Water	What Type of wer/Sanitary System is on the property?	What Type of er/Sanitary Sy on the proper	What Type of Sewer/Sanitary System Is on the property?	# of bedrooms	Use	# of Stories and/or basement		Project (what are you applying for)	Value at Time of Completion * include donated time &
			TOTAL STATE OF THE	200 200 200 200 200 200 200 200 200 200	A control of the cont				☐ Non-Shoreland
No (	No S	e: feet	Distance Structure is from Shoreline: $78^i$ fee	Distance Stru	Pond or Flowage If yes—continue —	X Is Property/Land within 1000 feet of Lake, Pond or Flowage	/Land within 1	🗴 Is Property	Shoreland →
Are Wetlands Present?  X Yes	Is Property in Floodplain Zone?	<u> </u>	Distance Structure is from Shoreline: fee	Distance Stru	(incl. intermittent)	☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes—continue —▶	/Land within 3 dward side of I	Is Property	
	+								
33	Acreage 人 た	Size	Lot Size	25/6	Town of:	N, Range 8 W	<u>ل</u> ال	, Township	Section D
-		Subdivision	BIOCK(S) NO.	Lot(s) No.	Vol & Page	t Lot(s) CSM	Gov't Lot	1/4	1/4,
943	74 Page(s)	ıme //	002-30000	12-105-1	1	(Use Tax Statement) 04-012-		Legal Description:	ON Ed
1010	(i.e. Propert	orded D	Reco	144	739-6621	739-	,	av shlower	Vora Karst
norization	Written Authorization Attached	(p):	Agent Mailing Address (include City/State/Zlp):	ent Mailing Ado			(Person Signing Application on behalf of Owner(s))	on Signing Applic	Authorized Agent: (Person
ine:	Plumber Phone:			Plumber:	1899)	Contractor		A Calaba	Contractor:
				5482		City/State/Zip:	e R	Ve lak	Si Proper
8640	Cell Phone:	888	Analicim, CA 9280	St. And	Anise	384So	1. T.	Hulbert	Nowner's Name:
7/4	B.O.A. UOTHER  Telephone: 7/4		☐ CONDITIONAL USE ☐ SPECIAL USE City/State/Zip:	ONDITIONAL city/s	X	☐ SANITARY	X LAND USE	JESTED▶	TYPE OF PERMIT REQUESTED—▶
The state of the s									

Owner(s):

(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application) Authorized Agent: Maria able time for the purpose of inspection Signing on behalf of the ow Date Date

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE Attach

4832 Copy of Tax Statement

Fyou recently purchased the property send your Recorded Deed

Address to send permit 10 Secretarial Staff

Rec'd for Issuance dares to send permit 10/6

760

上面村

Wie

DIUMMOND of authorization must

54832

- Show Location of: Show / Indicate:
- Show Location of (\*):
- Show:

- Show any (\*): Show any (\*):
- Proposed Construction
  North (N) on Plot Plan
  (\*) Driveway and (\*) Frontage Road (Name Frontage Road)
- All Existing Structures on your Property

  (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)

  (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond

  (\*) Wetlands; or (\*) Slopes over 20%

drok walkway existino Malkway Now. < よりメアラ 6'x40' 61240

See attached

Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

			Feet	<u>5</u> 4	Setback to Privy (Portable, Composting)
			Feet	604	Setback to Drain Field
Feet	ù Si	Setback to Well	Feet	ယ ၀	Setback to Septic Tank or Holding Tank
				,	
Feet	75	Elevation of <b>Floodplain</b>	Feet	بر 0	Setback from the <b>East</b> Lot Line
Feet	#S	Setback from 20% Slope Area	Feet		Setback from the West Lot Line
Feet	120,	Setback from <b>Wetland</b>	Feet	140	Setback from the <b>South</b> Lot Line
			Feet	ZJ.	Setback from the North Lot Line Lake
Feet	NA	Setback from the Bank or Bluff			
Feet	NA	Setback from the River, Stream, Creek	Feet	1 000	Setback from the Established Right-of-Way
Feet	78	Setback from the <b>Lake</b> (ordinary high-water mark)	Feet	4007	Setback from the Centerline of Platted Road
				<b>)</b>	
ent	Measuremen	Description	ent	Measurement	Description
				•	

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be meas other previously surveyed corner or marked by a licensed surveyor at the owner's expense. ured must be visible from one previously surveyed corner to the

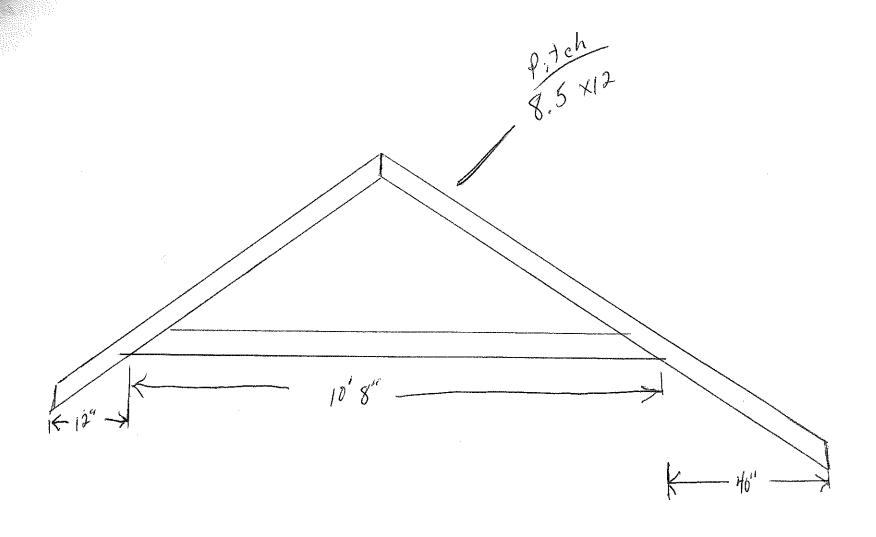
Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

## Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code Town, Village, City, State or Federal agencies may also require permits.

Hold For Sanitary: Hold For TBA: Hold For Affidavit:	Signature of Inspector: Michael Lutale	Meeta all requirements. 1°/0/_ (maperosista surface) Mo exprusion of structury for they need to be attached.)	Date of Inspection: 9-27-12 Inspected by: M. Fudala	Inspection Record: Conforming structuse. Meets all settoriced.	Was Parcel Legally Created XYes □ No Was Proposed Building Site Delineated XYes □ No	Granted by Variance (B.O.A.) □ Yes 🐧 No Case #:	Is Parcel a Sub-Standard Lot   □ Yes (Deed of Record) XNo Is Parcel in Common Ownership   □ Yes (Fused/Contiguous Lot(s)) XNo Is Structure Non-Conforming XYes □ No	Permit #: 12-0383 Permit Date: 9-6	Permit Denied (Date): Reason for Denial:	Issuance Information (County Use Only)  Sanitary Number:
davit: 🗌 Hold For Fees: 🗎		Mo they need to be attached.)  maperworks surface  tourney.	turlob \	etsal sporola.	Were Property Lines Represented by Owner Was Property Surveyed	Previously Granted by Variance (B.O.A.) ☐ Yes 🐧 No Ca:	Mitigation Required ☐ Yes ☐ No Mitigation Attached ☐ Yes ☐ No	9-87-18		# of bedrooms:
THE	Date of Approprial 12		Date of Re-Inspection:	Zoning District ( $R$ - $I$ ) Lakes Classification ( $A$ )	r Mayes □ No	Case #:	Affidavit Required ☐ Yes ☐ No Affidavit Attached ☐ Yes ☐ No			Sanitary Date:

New Dark Green Steel Roof



Building is 18' Long